

APP3629
8/20

PTO/SB/31 (04-05)

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NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) PSTM0038/MRK/STM						
<p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 [37 CFR 1.8(a)] on <u>September 4, 2007</u></p> <p>Signature <u>Alexandra Allison</u></p> <p>Typed or printed name <u>Alexandra Allison</u></p>		<p>In re Application of David Allison Bennett, et al.</p> <table border="1"> <tr> <td>Application Number 09/684,866</td> <td>Filed 10/6/2000</td> </tr> <tr> <td colspan="2">For Apparatus, Systems and Methods for Online, Multi-Carrier, Multi-Service Parcel Shipping Management</td> </tr> <tr> <td>Art Unit 3629</td> <td>Examiner Plucinski, Jamisue A.</td> </tr> </table>	Application Number 09/684,866	Filed 10/6/2000	For Apparatus, Systems and Methods for Online, Multi-Carrier, Multi-Service Parcel Shipping Management		Art Unit 3629	Examiner Plucinski, Jamisue A.
Application Number 09/684,866	Filed 10/6/2000							
For Apparatus, Systems and Methods for Online, Multi-Carrier, Multi-Service Parcel Shipping Management								
Art Unit 3629	Examiner Plucinski, Jamisue A.							

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner, rejecting Claims 1-6, 28-33, 49-52 and 58.

The fee for this Notice of Appeal is (37 CFR 41.20(b)(1))

\$ 500.00

Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ _____

A check in the amount of the fee is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.

The Director is hereby authorized to charge any underpayment of fees which may be required, or credit any overpayment to Deposit Account No. 501574. I have enclosed a duplicate copy of this sheet.

A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

I am the

applicant/inventor.

assignee of record of the entire interest.
See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed.
(Form PTO/SB/96)

attorney or agent of record.
Registration number 45,744

attorney or agent acting under 37 CFR 1.34.
Registration number if acting under 37 CFR 1.34. _____

Marilyn R. Khorsandi
Signature

Marilyn R. Khorsandi
Typed or printed name

(626) 796-2856
Telephone number

August 20, 2007
Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required.
Submit multiple forms if more than one signature is required, see below*.

<input type="checkbox"/> *Total of <u>_____</u> forms are submitted.	500.00 09/07/2007 FMTKE1 01654866
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This collection of information is required by 37 CFR 41.31. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11, 1.14 and 41.6. This collection is estimated to take 120 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

09/07/2007 FMTKE1
01 FC:1401

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



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Alexandra Allison
Alexandra Allison

Applicant : David Allison Bennett, et al.
 Application No. : 09/684,866
 Filed : October 6, 2000
 Title : Apparatus, Systems and Methods For Online, Multi-Carrier, Multi-Service Parcel Shipping Management
 Grp./Div. : 3629
 Examiner : Jamiesue A. Plucinski
 Docket No. : PSTM0038/MRK/STM

COPY

TRANSMITTAL LETTER

Mail Stop AF
 Commissioner For Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

140 S. Lake Ave., Suite 312
 Pasadena, CA 91101
 September 4, 2007

Commissioner:

Attached are the following:

1. Fee Transmittal (in duplicate);
2. Check Number 2372 for the amount of \$500 to cover the Notice of Appeal filing fee;
3. Notice of Appeal (in duplicate); and
4. Return Post Card

Enclosed is a Notice of Appeal from the final rejection of Claims 12, 27, 29-31, 33-36, 42, 44, 45, 49 and 50 in the Office Action dated June 4, 2007. The Office Action set a period for reply of three (3) months, namely, by September 4, 2007. It is respectfully submitted that the enclosed Notice of Appeal is timely filed because it is filed before the expiration of the three-month period designated in the Office Action for response, namely, before the expiration of September 4, 2007.

Even so, the Commissioner is hereby authorized, pursuant to 37 CFR 1.136(a)(3), to treat any concurrent or future reply or correspondence for the above-

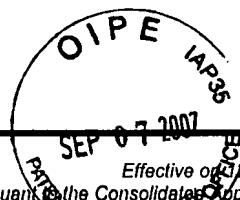
identified application, requiring a petition for an extension of time for its timely submission, as incorporating a petition for an extension of time for the appropriate length of time. The Commissioner is hereby authorized to charge any fees under 37 CFR 1.16 and 1.17, including any required extension fees, which may be required during the pendency of this application to Deposit Account No. 501574 and to treat this authorization as a constructive petition for an extension of time in any concurrent or future reply or correspondence for this application requiring a petition for an extension of time for its timely submission. Please show our docket number with any charge or credit to our Deposit Account. **A copy of this letter is enclosed.**

COPY

Respectfully submitted,
KHORSANDI PATENT LAW GROUP, ALC

By Marilyn R. Khorsandi 9/4/2007
Marilyn R. Khorsandi
Reg. No. 45,744
Customer No. 29524
626/796-2856

MRK/aa
Enclosures



Effective on 12/8/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEES TRANSMITTAL For FY 2007

Applicant Claims small entity status. See 37 CFR 1.27

Complete if Known

Application Number	09/684,866
Filing Date	October 6, 2000
First Named Inventor	David Allison Bennett, et al.
Examiner Name	Jamisue A. Plucinski
Art Unit	3629
TOTAL AMOUNT OF PAYMENT	(\$1) 500.00
Attorney Docket No.	PSTM0038/MRK/STM

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 501574 Deposit Account Name: Khorsandi Patent Law Group, ALC

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charges fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments

under 37 CFR 1.16 and 1.17

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		COPY
	Small or Large Entity	Fee (\$)	Small or Large Entity	Fee (\$)	Small or Large Entity	Fee (\$)	
Utility	300	150	500	250	200	100	\$0.00
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

Small or Large Entity

Fee (\$) **Fee (\$)**

50 25

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

200 100

Multiple dependent claims

360 180

Total Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)**

Multiple Dependent Claims

Fee (\$) **Fee Paid (\$)**

- or HP = x \$0.00 = \$0.00

\$0.00

HP = highest number of total claims paid for, if greater than 20

Indep. Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)**

- or HP = x \$0.00 = \$0.00

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity)

for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 = 0	/ 50 = 0	(round up to a whole number) x \$250.00 = \$0.00		

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: Notice of Appeal

\$500.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent) 45744	Telephone (626) 796-2856
Name (Print/Type)	Marilyn R. Khorsandi		Date <i>Sept. 4, 2007</i>



<p>Effective on 12/8/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</p> <p>Fee Transmittal For FY 2007</p>		Complete if Known	
		Application Number	09/684,866
		Filing Date	October 6, 2000
		First Named Inventor	David Allison Bennett, et al.
		Examiner Name	Jamisue A. Plucinski
<input type="checkbox"/> Applicant Claims small entity status. See 37 CFR 1.27		Art Unit	3629
TOTAL AMOUNT OF PAYMENT (\$) 500.00		Attorney Docket No.	PSTM0038/MRK/STM

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 501574 Deposit Account Name: Khorsandi Patent Law Group, ALC

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

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FEES CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

FILING FEES **SEARCH FEES** **EXAMINATION FEES**

Application Type	Small or Large Entity		Small or Large Entity		Small or Large Entity		Fees Paid (\$)
	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	
Utility	300	150	500	250	200	100	\$.00
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

Multiple dependent claims

Total Claims	Extra Claims		Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	
	Fee (\$)	Fee (\$)			Fee (\$)	Fee (\$)
- or HP =		x	\$.00	= \$ 0.00		

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\$ 0.00

Indep. Claims	Extra Claims		Fee (\$)	Fee Paid (\$)	
- or HP =		x	\$.00	= \$ 0.00	

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- 100 =	0	/ 50 =	0 (round up to a whole number)	x \$250.00 =	\$ 0.00

4. OTHER FEE(S)

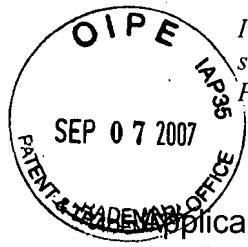
Non-English Specification, \$130 fee (no small entity discount)

Other: Notice of Appeal _____ \$ 500.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	45744	Telephone	(626) 796-2856
Name (Print/Type)	Marilyn R. Khorsandi			Date	Sept. 4, 2007

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